

DEC 12 2005

Atty Docket No. 021819-000200US

PTO FAX NO.: 1-571-273-8300

ATTENTION: Examiner Anne Marie Falk

Group Art Unit 1632

OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER Anne Marie Falk

CERTIFICATION OF FACSIMILE TRANSMISSION

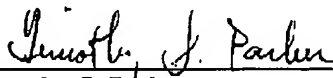
I hereby certify that the following documents in re Application of Steven W. Dow, et al. ,
Application No. 10/780,294, filed February 17, 2004 for SYSTEMIC IMMUNE ACTIVATION
METHOD USING NON CPG NUCLEIC ACIDS are being facsimile transmitted to the Patent and
Trademark Office on the date shown below.

Documents Attached

1. Form PTO SB/21
2. 2 counterpart Powers of Attorney and Correspondence Address Indication Forms
3. 2 counterpart Statements under 37 CFR 3.73(b)

Number of pages being transmitted, including this page: 6

Dated: December 12, 2005


Timothy S. Parker

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TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, CA 94111-3834
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0856

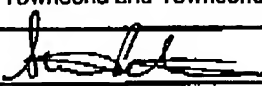
60654171 v1

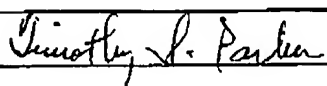
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PTO/58/21 (08-04)

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/780,294	
	Filing Date	February 17, 2004	
	First Named Inventor	Dow, Steven W.	
	Art Unit	1632	
	Examiner Name	Anne Marie Falk	
Total Number of Pages in This Submission	5	Attorney Docket Number	021819-000200US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Powers of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Counterpart Statements under 37 CFR 3.73(b)
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Steven C. Petersen		
Date	December 12, 2005	Reg. No.	36,238

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. 1-571-273-8300 on December 12, 2005.			
Signature			
Typed or printed name	Timothy S. Parker	Date	December 12, 2005

60654146 v1

DEC 12 2005

PTO/SB/61 (04-05)

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	10/780,294
	Filing Date	February 17, 2004
	First Named Inventor	Dow, Steven W.
	Title	SYSTEMIC IMMUNE ACTIVATION METHOD USING NON CPG NUCLEIC ACIDS
	Art Unit	1632
	Examiner Name	Anne Marie Falk
	Attorney Docket Number	021819-000200US

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

20350

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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☐ The address associated with Customer Number:

OR

☐ Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Signature

Date

Name

Martin D. Cleary

Telephone

(925) 399-6180

Title and Company

President and CEO; Juvartis BioTherapeutics, Inc.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

60614668 v1

DEC 12 2005

PTO/SB/86 (09-04)

Attorney Docket No. 021819-000200US

STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Steven W. Dow, et al.Application No./Patent No.: 10/780,294 Filed/Issue Date: February 17, 2004Entitled: SYSTEMIC IMMUNE ACTIVATION METHOD USING NON CPG NUCLEIC ACIDSJuvaris BioTherapeutics, Inc., a Delaware corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

2. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☒ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Martin D. Cleary
SignatureMartin D. Cleary

Printed or Typed Name

President and CEO

Title

10/25/05
Date(925)399-6180

Telephone Number

60614699 v1

DEC 12 2005

PTO/SB/81 (04-05)

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	10/780,294
	Filing Date	February 17, 2004
	First Named Inventor	Dow, Steven W.
	Title	SYSTEMIC IMMUNE ACTIVATION METHOD USING NON CPG NUCLEIC ACIDS
	Art Unit	1832
	Examiner Name	Anne Marie Falk
	Attorney Docket Number	021819-000200US

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

20350

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

☐ The address associated with Customer Number:

OR

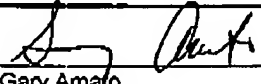
<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Email		

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Signature		Date	12/2/05
Name	Gary Amato	Telephone	970/482-2916
Title and Company	Director of Technology Transfer, Colorado State University Research Foundation		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

60814891 v1

DEC 12 2005

PTO/SB/98 (08-04)

Attorney Docket No. 021819-000200US

STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Steven W. Dow, et al.Application No./Patent No.: 10/780,294 Filed/Issue Date: February 17, 2004Entitled: **SYSTEMIC IMMUNE ACTIVATION METHOD USING NON CPG NUCLEIC ACIDS**Colorado State University Research Foundation, a not-for-profit Colorado corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

2. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☒ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.



Signature

Gary Amato

Printed or Typed Name

Director of Technology Transfer

Title

12/2/05
Date970/482-2916
Telephone Number

60614707 v1